

LIFE, ACCIDENT AND HEALTH INSURERS

COMPANY NAME: _____ **NAIC Company Code:** _____

Contact: _____ **Telephone:** _____

REQUIRED FILINGS IN THE STATE OF: GEORGIA **Filings Made During the Year 2014**

(1) Check-list	(2) Line #	(3) REQUIRED FILINGS FOR THE ABOVE STATE	(4) NUMBER OF COPIES*			(5) DUE DATE	(6) FORM SOURCE**	(7) APPLICABLE NOTES
			Domestic		Foreign			
			State	NAIC	State			
		I. NAIC FINANCIAL STATEMENTS						
	1	Annual Statement (8 1/2"x14")	1	EO	xxx	3/3	NAIC	
	1.1	Printed Investment Schedule detail (Pages E01-E27)	1	EO	xxx	3/3	NAIC	
	2	Quarterly Financial Statement (8 1/2" x 14")	1	EO	xxx	5/15, 8/15, 11/15	NAIC	
	3	Separate Accounts Annual Statement (8 1/2"x14")	1	EO	xxx	3/1	NAIC	
		II. NAIC SUPPLEMENTS						
	10	Accident & Health Policy Experience Exhibit	1	EO	xxx	4/1	NAIC	
	11	Actuarial Certification Related Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities	1	EO	xxx	3/3	Company	
	12	Actuarial Certification Related to Hedging required by Actuarial Guideline XLIII	1	EO	xxx	3/3	Company	
	13	Actuarial Certification Related to Reserves required by Actuarial Guideline XLIII	1	EO	xxx	3/3	Company	
	14	Actuarial Certification regarding use 2001 Preferred Class Table	1	EO	xxx	3/3	Company	
	14.1	Actuarial Memorandum Related to Universal Life with Secondary Guarantee Policies required by Actuarial Guideline XXXVIII	1	N/A	xxx	4/30	Company	
	15	Actuarial Opinion	1	EO	xxx	3/3	Company	
	16	Actuarial Opinion on X-Factors	1	EO	xxx	3/3	Company	
	17	Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit	1	EO	xxx	3/3	Company	
	18	Actuarial Opinion on Synthetic Guaranteed Investment Contracts	1	EO	xxx	3/3	Company	
	19	Actuarial Opinion required by Modified Guaranteed Annuity Model Regulation	1	EO	xxx	3/3	Company	
	20	Analysis of Annuity Operations by Lines of Business	1	EO	xxx	4/1	NAIC	
	21	Analysis of Increase in Annuity Reserves During Year	1	EO	xxx	4/1	NAIC	
	22	Credit Insurance Experience Exhibit	1	EO	xxx	4/1	NAIC	
	23	Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII	1	EO	xxx	3/3	Company	
	24	Health Care Exhibit (Parts 1, 2 and 3) Supplement	1	EO	xxx	4/1	NAIC	
	25	Health Care Exhibit's Allocation Report Supplement	1	EO	xxx	4/1	NAIC	
	26	Interest Sensitive Life Insurance Products Report	1	EO	xxx	4/1	NAIC	
	27	Investment Risk Interrogatories	1	EO	xxx	4/1	NAIC	
	28	Life, Health & Annuity Guaranty Assessment Base Reconciliation Exhibit	1	EO	xxx	4/1	NAIC	
	29	Life, Health & Annuity Guaranty Assessment Base Reconciliation Exhibit Adjustment Form	1	EO	xxx	4/1	NAIC	
	30	Long-term Care Experience Reporting Forms	1	EO	xxx	4/1	NAIC	
	31	Management Certification that the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII	1	EO	xxx	3/3	Company	
	32	Management Discussion & Analysis	1	EO	xxx	4/1	Company	
	33	Medicare Supplement Insurance Experience Exhibit	1	EO	xxx	3/3	NAIC	
	34	Medicare Part D Coverage Supplement	1	EO	xxx	3/3, 5/15, 8/15, 11/15	NAIC	
	35	Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV	1	EO	xxx	3/3, 5/15, 8/15, 11/15	Company	
	36	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXV	1	EO	xxx	3/3, 5/15, 8/15, 11/15	Company	
	37	Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI	1	EO	xxx	3/3, 5/15, 8/15, 11/15	Company	
	38	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value)	1	EO	xxx	3/3, 5/15, 8/15, 11/15	Company	
	39	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value)	1	EO	xxx	3/3, 5/15, 8/15, 11/15	Company	
	40	Risk-Based Capital Report	1	EO	xxx	3/3	NAIC	
	41	RBC Certification required under C-3 Phase I	1	EO	xxx	3/3	Company	

	42	RBC Certification required under C-3 Phase II	1	EO	xxx	3/3	Company	
	43	Schedule SIS	1	N/A	N/A	3/3	NAIC	
	44	Statement on non-guaranteed elements - Exhibit 5 Int. #3	1	EO	xxx	3/3	Company	
	45	Statement on par/non-par policies – Exhibit 5 Int. 1&2	1	EO	xxx	3/3	Company	
	46	Supplemental Compensation Exhibit	1	N/A	N/A	3/3	NAIC	
	47	Supplemental Schedule O	1	EO	xxx	3/3	NAIC	
	48	Trusted Surplus Statement	1	EO	xxx	3/3, 5/15, 8/15, 11/15	NAIC	
	49	Workers' Compensation Carve-Out Supplement	1	EO	xxx	3/3	NAIC	
		III. ELECTRONIC FILING REQUIREMENTS						
	50	Annual Statement Electronic Filing	xxx	EO	xxx	3/1	NAIC	
	51	March .PDF Filing	xxx	EO	xxx	3/1	NAIC	
	52	Risk-Based Capital Electronic Filing	xxx	EO	N/A	3/1	NAIC	
	53	Risk-Based Capital .PDF Filing	xxx	EO	N/A	3/1	NAIC	
	54	Separate Accounts Electronic Filing	xxx	EO	xxx	3/1	NAIC	
	55	Separate Accounts .PDF Filing	xxx	EO	xxx	3/1	NAIC	
	56	Supplemental Electronic Filing	xxx	EO	xxx	4/1	NAIC	
	57	Supplemental .PDF Filing	xxx	EO	xxx	4/1	NAIC	
	58	Quarterly Statement Electronic Filing	xxx	EO	xxx	5/15, 8/15, 11/15	NAIC	
	59	Quarterly .PDF Filing	xxx	EO	xxx	5/15, 8/15, 11/15	NAIC	
	60	June .PDF Filing	xxx	EO	xxx	6/1	NAIC	
		IV. AUDIT/INTERNAL CONTROL RELATED REPORTS						
	71	Accountants Letter of Qualifications	1	EO	N/A	6/1	Company	
	72	Audited Financial Reports	1	EO	xxx	6/1	Company	
	73	Audited Financial Reports Exemption Affidavit	1	N/A	N/A		Company	
	74	Communication of Internal Control Related Matters Noted in Audit	1	N/A	N/A	8/1	Company	
	75	Independent CPA (change)	1	N/A	N/A	5 days from event	Company	
	76	Management's Report of Internal Control Over Financial Reporting	1	N/A	N/A	8/1	Company	
	77	Notification of Adverse Financial Condition	1	N/A	N/A	5 days from event	Company	
	78	Request for Exemption to File	1	N/A	N/A	12/31/13	Company	
	79	Relief from the five-year rotation requirement for lead audit partner	1	EO	xxx	3/3	Company	
	80	Relief from the one-year cooling off period for independent CPA	1	EO	xxx	3/3	Company	
	81	Relief from the Requirements for Audit Committees		EO		3/3	Company	
		V. STATE REQUIRED FILINGS***						
	101	Filings Checklist (with Column 1 completed)	1	N/A	EO	3/3	State	A-P
	102	Signed Jurat	1	N/A	xxx	3/3	NAIC	N
	103	Fees Statement and Transmittal Voucher	1	N/A	EO	3/3	State	E
	104	GID-003-RS	1	N/A	EO	3/3	State	F,G,H,I,J, K
	105	GID-010-RS	1	N/A	EO	3/3	State	F,G,H,I,J, K
	106	GID-011-RS (The Affidavit of Publication must be submitted to complete the filing)	1	N/A	EO	3/3	State	F,G,H,I,J, K
	107	GID-016-RS	1	N/A	N/A	3/3	State	F,G,H,I,J, K
	108	GID-018-RS (If Applicable)	1	N/A	EO	3/3	State	F,G,H,I,J, K
	109	GID-276-EN (A copy of the front and back of one secure and verifiable identification document must be submitted to complete the filing)	1	N/A	EO	3/3	State	F,G,H,I,J, K
	110	Certificate of Compliance	N/A	N/A	E/O	3/3	State	F,G,H,I,J, K
	111	Certificate of Deposit	N/A	N/A	E/O	3/3	State	F,G,H,I,J, K
	112	Certificate of Valuation	N/A	N/A	E/O	3/3	State	F,G,H,I,J, K
	113	Holding Company Registration Statement	1	N/A	N/A	4/30	State	

*If XXX appears in this column, this state does not require this filing, if hard copy is filed with the state of domicile and if the data is filed electronically with the NAIC. If N/A appears in this column, the filing is required with the domiciliary state. EO (electronic only filing).

**If Form Source is NAIC, the form should be obtained from the appropriate vendor.

***For those states that have adopted the NAIC updated Holding Company Model Act, a Form F filing is required annually by holding company groups. Consistent with the Form B filing requirements, the Form F is a state filing only and should not be submitted by the company to the NAIC. Note however that this filing is intended to be submitted to the lead state. For more information on lead states, see the following NAIC URL:

http://www.naic.org/public_lead_state_report.htm

NOTES AND INSTRUCTIONS (A-K APPLY TO ALL FILINGS)			
	A	Required Filings Contact Person:	<p>Bruce Williamson 404-657-9205 BWilliamson@oci.ga.gov</p>
	B	Mailing Address: (Applicable for Domestic Insurers only)	<p>Georgia Department of Insurance Division of Insurance & Financial Oversight 2 Martin Luther King Jr., Drive West Tower, Suite 604 Atlanta, GA 30334</p>
	C	Creating a portal account:	<p>All licensed companies are required to maintain an account on the company portal. Companies may use the information below to create an account if they have not previously done so.</p> <p>Once you have determined who you want as administrators, please send the information as an e-mail attachment to the attention of Bruce Williamson at BWilliamson@oci.ga.gov</p> <ul style="list-style-type: none"> • on your company's letter head • the name of the company you are making this request for • the NAIC number of the company • the names of the administrators • the telephone number of the administrators • the email addresses of the administrators • the letter must be signed by company's president or vice-president <p>Once the letter has been received our department will set up the portal account. The individuals designated as administrators will receive an e-mail that will grant them temporary access to the portal.</p>
	D	Accessing the Annual Renewal Packages:	<p>Visit the department's website www.oci.ga.gov</p> <p>Once on the home page, located near the top of the page is a gray strip; click on the word Insurers within that strip.</p> <p>On the left side of the page click Regulatory Services, next click on Renewal Instructions and Forms.</p> <p>Select your company type and all of the documents required for completing the annual renewal packages are located within this section</p>
	E	Payment of the renewal fees:	<p><u>Total Annual Renewal Fees are \$700.00.</u></p> <p>The payment of the renewal fees is a bank to bank transaction accomplished thru an electronic funds transfer (ACH) for both domestic and foreign insurers.</p> <p>Newly licensed companies or companies that have not previously submitted an Official EFT Request will need to do so by 1/31/2014.</p> <p>To request authorization to the Department's banking information please follow these steps. (1) Access the company portal on our website www.oci.ga.gov (2) Go to the "Official EFT Request" and</p>

			<p>click on the word form, which is blue in color, located near the top on the page. (3) Complete the form supplying all of the requested information, print the document, scan the page into a “PDF” and upload the request in the Upload a New Document section. Upon receipt of the request, the filing will be reviewed and the company will be notified of the department’s decision.</p> <p><u>The Official EFT Request is a onetime submission. Once a company has been granted access to the banking information, that authorization is granted perpetually unless revoked by our department.</u></p> <p><u>Copies of the Fees Statement document, plus the transmittal voucher provided by your bank must be submitted as proof that the annual renewal fee has been paid.</u></p>
	F	Delivery Instructions: Domestic Insurers:	<p>Georgia is an in house state and all annual renewal packages must be submitted <u>via hard copy</u> and delivered on or before 3/3/2014.</p> <p>All Domestic annual statements and renewal packages <u>must be mailed.</u> Acceptable delivery methods include U.S. Mail, UPS, FedEx, or the overnight carrier of your choice.</p> <p><u>Deliveries by local courier or by hand will not be accepted.</u></p> <p>Each licensed insurer within a holding company system of multiple Georgia-licensed carriers must file separate annual renewal packages for each licensed entity <u>clearly marked with the company name and NAIC number.</u></p> <p>All renewal documents submitted by domestic companies <u>must</u> have original signatures.</p> <p>In the event that the due date falls on a weekend or a day that our office is closed, the annual renewal packages are due on the next business day</p>
	G	Delivery Instructions: Foreign Insurers:	<p>Georgia is an in house state and all renewal packages <u>must be submitted electronically</u> on or before 3/3/2014.</p> <p><u>Any hard copies of the annual renewal package received by the department will not be accepted and will be returned to the sender at their cost.</u></p> <p>Annual renewal packages are to be submitted in “PDF” format via the company portal under the “Go To: Company Annual Renewal” field. Each licensed insurer within a holding company system of multiple Georgia-licensed carriers must file separate annual renewal packages for each licensed entity <u>clearly marked with the company name and NAIC number.</u></p> <p><u>The required documents that complete the annual renewal package must be uploaded as a single “PDF” packet, not as individual items.</u></p> <p>In the event that the due date falls on a weekend or a day that our office is closed, the annual renewal packages are due on the next business day.</p>

	H	Late Filings:	Filings are due in our office on or before the date indicated. Late or incomplete filings may be subject to administrative action including fines.(Reg, 120-2-18-1)
	I	Original Signatures:	All annual renewal documents submitted must have original signatures from the appropriate individuals. Foreign Insurers are required to file electronically; therefore, the scanned "PDF" of the documents with original signatures is acceptable.
	J	Signature/Notarization/ Certification:	All appropriate annual renewal documents shall be signed, notarized and/or certified.
	K	Amended Filings:	Amended filings shall be submitted to the appropriate division of the department as soon as the amendment(s) become available.
	L	Exceptions from normal filings:	<p><u>Note: This filing method and fee payment method is a change from prior years when paper filings were requested with this set of annual license renewal instructions.</u></p> <p>All Life/Health writing Companies, if applicable because of activity in these Georgia product markets, a Listing of Exempt filings, per Rule 120-2-25-.04, and/or the Small Group Pooling Certification, per Rule 120-2-10-.12(9) or Life/Annuity Advertising Annual Certification, per Rule 120-2-11-.11(2) or Accident and Sickness Advertising Annual Certification, per Rule 120-2-12-.19(3) should be submitted via NAIC SERFF system as TOI: "Other" and Description: "Annual Exempt Forms Listing" or "Small Group Pooling and Rating Annual Certification" or "Annual Advertising Certification", respectively, as applicable.</p> <p>A \$25 Filing Fee for each of these respective forms, paid by EFT within SERFF is required, as is normal with all other policy forms related filings. If you are not familiar with SERFF filing and/or EFT fees payment issues, please seek appropriate guidance from your corporate compliance or policy forms filing internal personnel.</p>
	M	Bar Codes (State or NAIC):	N/A
	N	Signed Jurat:	<u>Required for Domestic Companies only.</u>
	O	None Filings:	N/A
	P	Filings new, discontinued or modified materially since last year:	

**General Instructions
For Companies to Use Checklist**

Please Note: This state's instructions for companies to file with the NAIC are included in this Checklist. The NAIC will not be sending their own checklist this year.

Electronic filing is intended to be filing(s) submitted to the NAIC via the NAIC Internet Filing Site which eliminates the need for a company to submit diskettes or CD-ROM to the NAIC. Companies are not required to file hard copy filings with the NAIC.

Column (1) (Checklist)

Companies may use the checklist to submit to a state, if the state requests it. Companies should copy the checklist and place an "x" in this column when mailing information to the state.

Column (2) (Line #)

Line # refers to a standard filing number used for easy reference. This line number may change from year to year.

Column (3) (Required Filings)

Name of item or form to be filed.

The ***Annual Statement Electronic Filing*** includes the annual statement data and all supplements due March 1, per the *Annual Statement Instructions*. This includes all detail investment schedules and other supplements for which the *Annual Statement Instructions* exempt printed detail.

The ***March .PDF Filing*** is the .pdf file for annual statement data, detail for investment schedules and supplements due March 1.

The ***Risk-Based Capital Electronic Filing*** includes all risk-based capital data.

The ***Risk-Based Capital .PDF Filing*** is the .pdf file for risk-based capital data.

The ***Separate Accounts Electronic Filing*** includes the separate accounts annual statement and investment schedule detail.

The ***Separate Accounts .PDF Filing*** is the .pdf file for the separate accounts annual statement and all investment schedule detail.

The ***Supplemental Electronic Filing*** includes all supplements due April 1, per the *Annual Statement Instructions*.

The ***Supplement .PDF Filing*** is the .pdf file for all supplemental schedules and exhibits due April 1.

The ***Quarterly Electronic Filing*** includes the quarterly statement data.

The ***Quarterly .PDF Filing*** is the .pdf for quarterly statement data.

The ***June .PDF Filing*** is the .pdf file for the Audited Financial Statements and Accountants Letter of Qualifications.

Column (4) (Number of Copies)

Indicates the number of copies that each foreign or domestic company is required to file for each type of form. The Blanks (E) Task Force modified the 1999 *Annual Statement Instructions* to waive paper filings of certain NAIC supplements and certain investment schedule detail, if such investment schedule data is available to the states via the NAIC database. The checklists reflect this action taken by the Blanks (EX4) Task Force. XXX appears in the "Number of Copies" "Foreign" column for the appropriate schedules and exhibits. **Some states have chosen to waive printed quarterly and annual statements from their foreign insurers and to rely upon the NAIC database for these filings. This waiver could include supplemental annual statement filings. The XXX in this column might signify that the state has waived the paper filing of the annual statement and all supplements.**

Column (5) (Due Date)

Indicates the date on which the company must file the form.

Column (6) (Form Source)

This column contains one of three words: “NAIC,” “State,” or “Company.” If this column contains “NAIC,” the company must obtain the forms from the appropriate vendor. If this column contains “State,” the state will provide the forms with the filing instructions. If this column contains “Company,” the company, or its representative (e.g., its CPA firm), is expected to provide the form based upon the appropriate state instructions or the NAIC *Annual Statement Instructions*.

Column (7) (Applicable Notes)

This column contains references to the Notes to the Instructions that apply to each item listed on the checklist. The company should carefully read these notes before submitting a filing.